



2010 Maryland Nursing Facility Family Survey Statewide Report



Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, MD 21215



Macro International Inc.
11785 Beltsville Drive, Suite 300
Calverton, MD 20705

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2010 MARYLAND NURSING FACILITY FAMILY SURVEY STATEWIDE REPORT

I. INTRODUCTION

The Maryland Health Care Commission (MHCC) family experience of care initiative began in 2006 with a pilot survey intended to guide the start of an annual process. The purpose of the initiative is to measure the experience and satisfaction of family members and other designated responsible parties of residents in Maryland's nursing homes. The project's specific objectives are to provide: 1) measures of responsible party experience and satisfaction; 2) comparisons on experience and satisfaction measures between nursing homes in Maryland; and 3) comparisons between nursing home peer groups, including geographical region, facility size, and ownership type. The results of the survey are accessible to the public via the *MHCC Consumer Guide to Long-Term Care*—an interactive web tool containing information about an array of long-term care services including nursing homes and community support services such as senior centers, transportation, and technology assistance. Facility-specific results will be posted on the *MHCC Consumer Guide to Long-Term Care* to assist consumers in making informed decisions when selecting a nursing home for themselves, a family member, or friend.

This report presents the 2010 survey process and statewide results, as well as trends from 2007 to 2010.

Nursing homes receive a customized report with facility-specific results that enables each facility to compare itself to the statewide average rating and the ratings of other nursing homes. The facility specific report can serve as a management tool for nursing home staff to identify areas where the nursing home excels and areas for improvement.

The 2010 Nursing Facility Family Survey results highlights:

- The statewide average rating for the overall care received was 8.4 out of a possible 10; this represents a 0.1 improvement from the 8.3 statewide 2009 rating for overall care.
- Statewide, 90 percent of the respondents indicated that they would recommend the nursing home about which they were surveyed. This compares with 90 percent in 2009 and 89 percent in 2008.
- The highest rated domain in 2010, as in past years, is “Staff and Administration,” with an average statewide rating of 3.7 out of 4.
- The lowest rated domain is “Physical Aspects of the Nursing Home,” with a statewide rating of 3.4 out of 4.
- Facilities with 80 or fewer beds had the highest overall rating at 8.9 out of 10. The lowest rating of 8.1 was for facilities with 121–160 beds and for-profit facilities.

II. DESCRIPTION OF SAMPLE

All nursing facilities in Maryland with one or more residents that had a 90-day stay or longer as of July 30, 2010 were included in the sample. All nursing homes were asked to provide a list of the designated responsible parties of each of their current residents. A responsible party is often a family member, such as a spouse, child, or sibling, but can also be unrelated to the resident.

It is important to note that responsible parties of residents with a stay of less than 90 days did not participate in this survey, so the experience and satisfaction of the responsible parties of nursing facility residents with short-term skilled nursing care or rehabilitation needs are not captured by the results of the family survey. Most nursing facilities in Maryland provide care to both long term and short-stay residents; however, there are several nursing facilities that serve larger numbers of short-stay residents. To capture the experience of short-stay residents, a separate survey was conducted in 2010 among the recently discharged short-stay residents regarding their experience and satisfaction with the care received. The statewide results of the Recently Discharged Short Stay Resident Survey are presented in a separate report.

A survey packet consisting of a letter explaining the purpose of the survey and requesting participation, as well as the actual questionnaire, was sent to each designated responsible party whose resident(s) met the eligibility criteria.

III. SUMMARY OF SURVEY METHODS

All of the 224 nursing facilities throughout the State of Maryland submitted a responsible party list in 2010. Using the exclusion criteria below, programs were developed to identify which responsible parties and residents met the requirement for inclusion in the survey.

- Date of admission is after April 30, 2010.
- No responsible party is listed.
- Address for responsible party is incomplete or insufficient for mailing.
- Resident and the responsible party are the same.
- The contact address for the responsible party is a nursing home.
- The responsible party's address is outside the United States.

The list obtained after exclusions became the mailing list used to contact potential respondents. In all, surveys were mailed to 16,765 responsible parties.

The first survey packet was mailed on September 24, 2010. On October 7, two weeks following the initial mailing, a follow-up reminder postcard was sent.

A second survey packet was sent to those who had not yet responded to the survey on October 18, 2010. Follow-up telephone calls were made after the last mailing. Follow-up calls

began on November 5 and ended on November 18. Calls were placed each day of the week during 10:00 a.m. to 2:00 p.m. and/or from 5:00 p.m. to 9:00 p.m. Calls were also placed from 10:00 a.m. to 6:00 p.m. on Saturday, November 6. These times were chosen to maximize the contact rates and obtain completed surveys. During the week of November 9, additional phone calls were made to responsible parties from specific facilities with a relatively low response rate.

A total of 10,402 surveys were received through December 3, 2010 (this number includes duplicates and ineligible surveys). Once the duplicates, ineligible and undelivered surveys were accounted for, the final response rate was 56 percent for all facilities. Table A below summarizes the final 2010 Maryland Nursing Facility Family Survey sample.

Table A: 2010 Maryland Nursing Facility Family Survey Sample Summary

2010 Maryland Nursing Facility Family Survey	Total Participating Facilities	Total Surveys Mailed	Total Eligible Respondents	Response Rate*
	224	16,765	9,290	56%

*The response rate is calculated by dividing the number of eligible respondents by the total number of surveys mailed minus the number of undelivered surveys $[9,290/(16,765 - 142)]$.

IV. DESCRIPTION OF SURVEY INSTRUMENT

The designated responsible parties were asked to complete a survey about their experience and satisfaction with the facility and care provided to residents. The 2010 survey contained 34 items, including two items rating overall experience and 23 items which assessed the five domains or areas of the residents' life and care:

1. Staff and Administration of the Nursing Home
2. Care Provided to Residents
3. Food and Meals
4. Autonomy and Residents' Rights
5. Physical Aspects of the Nursing Home.

Within each domain, respondents rated different aspects of the resident's life and care.

V. HOW TO READ AND INTERPRET THE RESULTS

This report contains tables and charts that display average statewide ratings, as well as each of the four peer groups (region in the State, facility size, ownership type, and payment source) for each of the five domains and the two overall measures. For each peer group, a bar chart and table that display each of the five domain ratings are presented. The ratings were calculated by adding the rating given by each individual who responded to the question divided by the total number of responses.

Domain level ratings in the report are presented as averages on a scale of 1 to 4. The overall experience rating is presented as an average on a 1 to 10 scale. The overall recommendation rating is presented by percentage of respondents recommending the nursing home.

The survey item ratings are the average of a sample of respondents (that is, not the entire population of respondents) and as in any survey there is a margin of error associated with the estimates. That error is calculated and taken into account in the analysis process. Determination of the actual average rating would require surveying the entire population of responsible parties.

The domain ratings are calculated by averaging the ratings on the four-point scale (where 1=Never, 2=Sometimes, 3=Usually, and 4=Always) across all the valid questions within that domain.

For negatively worded questions, where “Never” was the positive answer, the responses were recorded so as 4=Never, 3=Sometimes, 2=Usually, and 1=Always. An example of such a question is Question 14. “In the last 6 months, how often, if at all, did you help with toileting because the nurses or nursing assistants either were not available or made the resident wait too long?”

A lower domain rating indicates a lower level of satisfaction within that particular area of care and experience, while a higher rating indicates higher satisfaction. For example, a domain with a low rating may be identified as an area for quality improvement.

Domain-Level Ratings

Each peer group’s results are presented by the five domains:

1. Staff and Administration of the Nursing Home
2. Care Provided to Residents
3. Food and Meals
4. Autonomy and Residents’ Rights
5. Physical Aspects of the Nursing Home.

Statistically Significant Differences

The overall rating tables in this report show an up (↑) or down (↓) arrow if statistically significant differences exist between the 2009 and 2010 ratings or between statewide and peer group ratings.

VI. RESULTS—DOMAIN RATINGS

Figure 1 and Table 1 show the statewide domain ratings for 2007 to 2010; this allows the five domains to be directly compared to each other across the 4 years of survey administration. Generally speaking, responsible parties rated each of the five domains at or above 3.4, indicating a high level of satisfaction. “Staff and Administration of the Nursing Facility” received the highest rating at 3.7, while “Physical Aspects of the Nursing Facility” and “Care Provided to Residents” received the lowest ratings at 3.4. Compared with 2009, responsible party 2010 ratings have remained constant.

Figure 1: Statewide Domain Ratings, 2007–2010

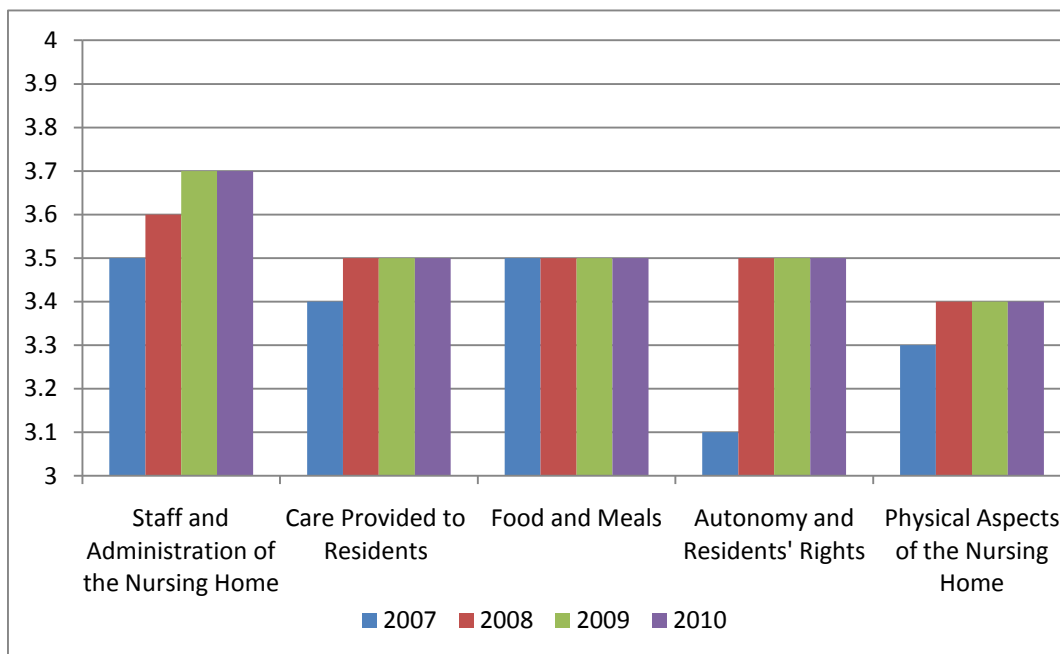


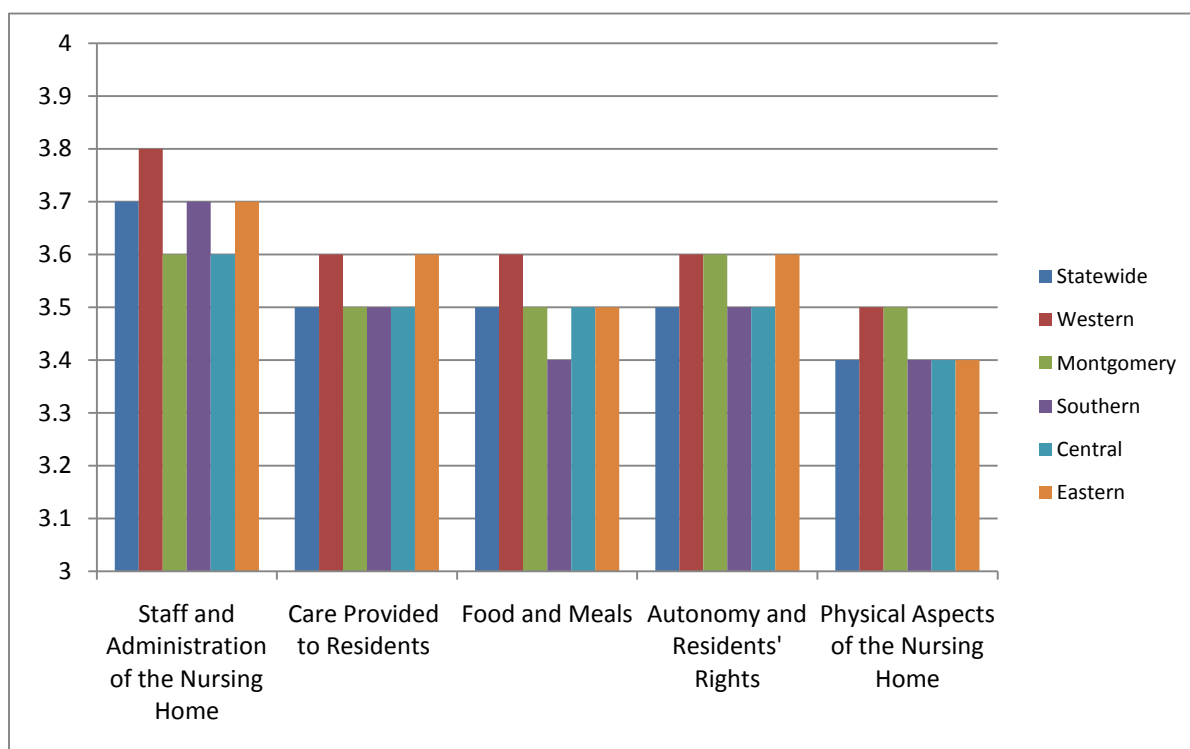
Table 1: Statewide Domain Ratings, 2007–2010

Domain	2007	2008	2009	2010
Staff and Administration	3.5	3.6	3.7	3.7
Care Provided	3.4	3.5	3.5	3.5
Food and Meals	3.5	3.5	3.5	3.5
Autonomy and Residents' Rights	3.1	3.5	3.5	3.5
Physical Aspects	3.3	3.4	3.4	3.4

Since 2008, the statewide ratings across all five domains have remained stable as shown in Table 1 above.

Figures 2 through 5 and Tables 2 through 5 that follow display the 2010 statewide and peer group ratings for each domain. Each of these figures and tables provides the statewide average ratings and peer group average ratings for the five domains.

Figure 2: Domain Ratings by Region of the State—2010 Survey

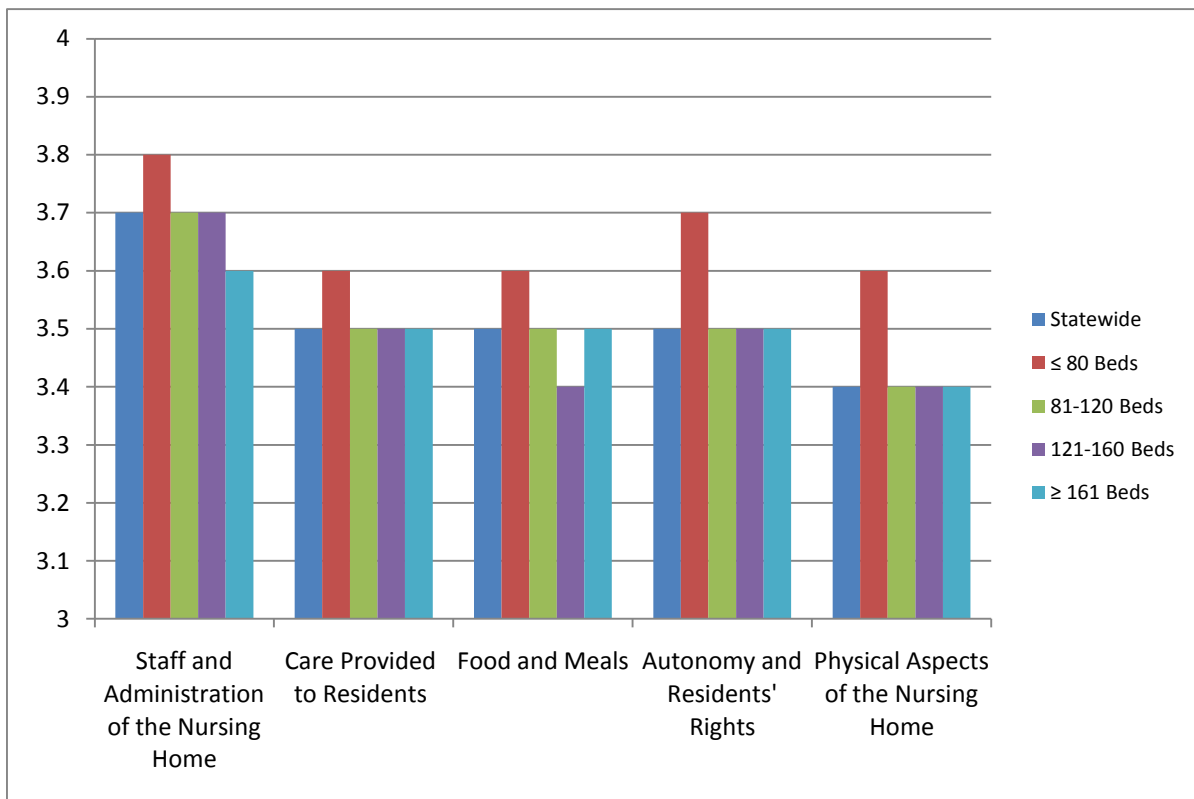


For all five domains, the Western region respondents gave higher ratings than other regions and the state average. The Central region rated each of the domains the same as the statewide average, except for “Staff and Administration” which was lower than the statewide rating (see Figure 2 and Table 2).

Table 2: Domain Ratings by Region of the State—2010 Survey

Domain	Statewide	Region of the State				
		Western	Montgomery	Southern	Central	Eastern
Staff and Administration	3.7	3.8	3.6	3.7	3.6	3.7
Care Provided	3.5	3.6	3.5	3.5	3.5	3.6
Food and Meals	3.5	3.6	3.5	3.4	3.5	3.5
Autonomy and Residents' Rights	3.5	3.6	3.6	3.5	3.5	3.6
Physical Aspects	3.4	3.5	3.5	3.4	3.4	3.4

Figure 3: Domain Ratings by Facility Size—2010 Survey

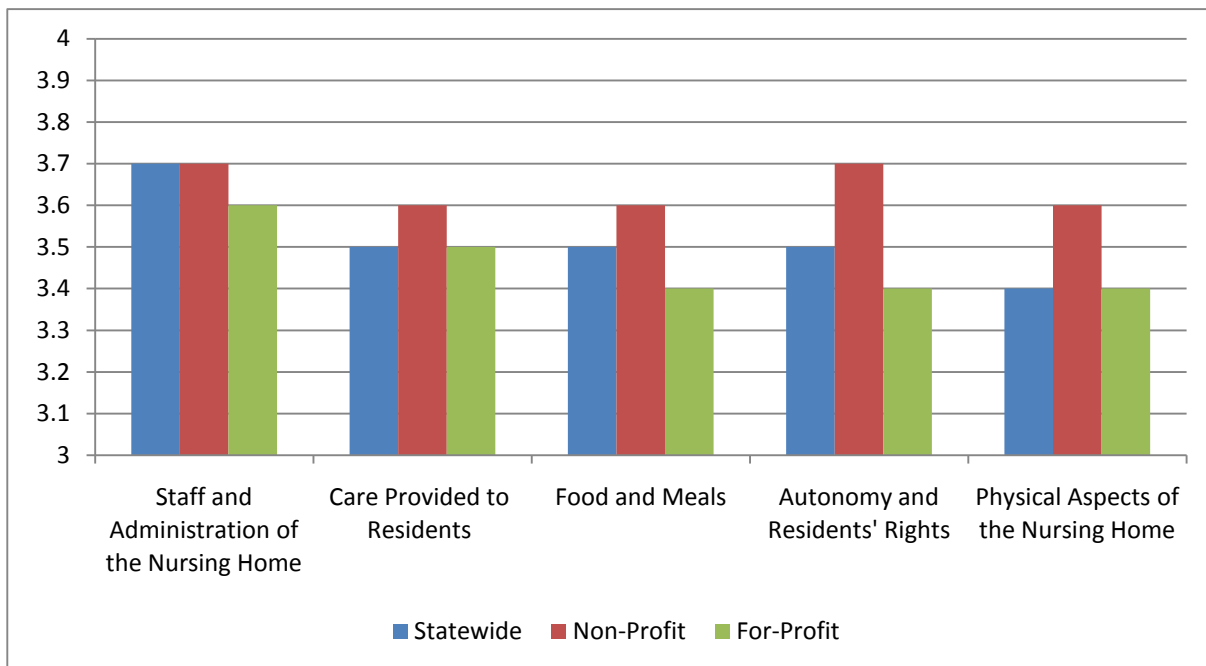


Generally speaking, responsible parties of residents from small facilities (≤ 80 Beds) rated each of the domains of care higher than facilities of all other sizes as well as the statewide average (see Figure 3 and Table 3).

Table 3: Domain Ratings by Facility Size—2010 Survey

Domain	Statewide	Facility Size			
		≤ 80 Beds	81–120 Beds	121–160 Beds	≥ 161 Beds
Staff and Administration	3.7	3.8	3.7	3.7	3.7
Care Provided	3.5	3.6	3.4	3.4	3.4
Food and Meals	3.5	3.6	3.5	3.4	3.5
Autonomy and Residents' Rights	3.5	3.7	3.6	3.5	3.6
Physical Aspects	3.4	3.6	3.4	3.4	3.4

Figure 4: Domain Ratings by Ownership Type—2010 Survey

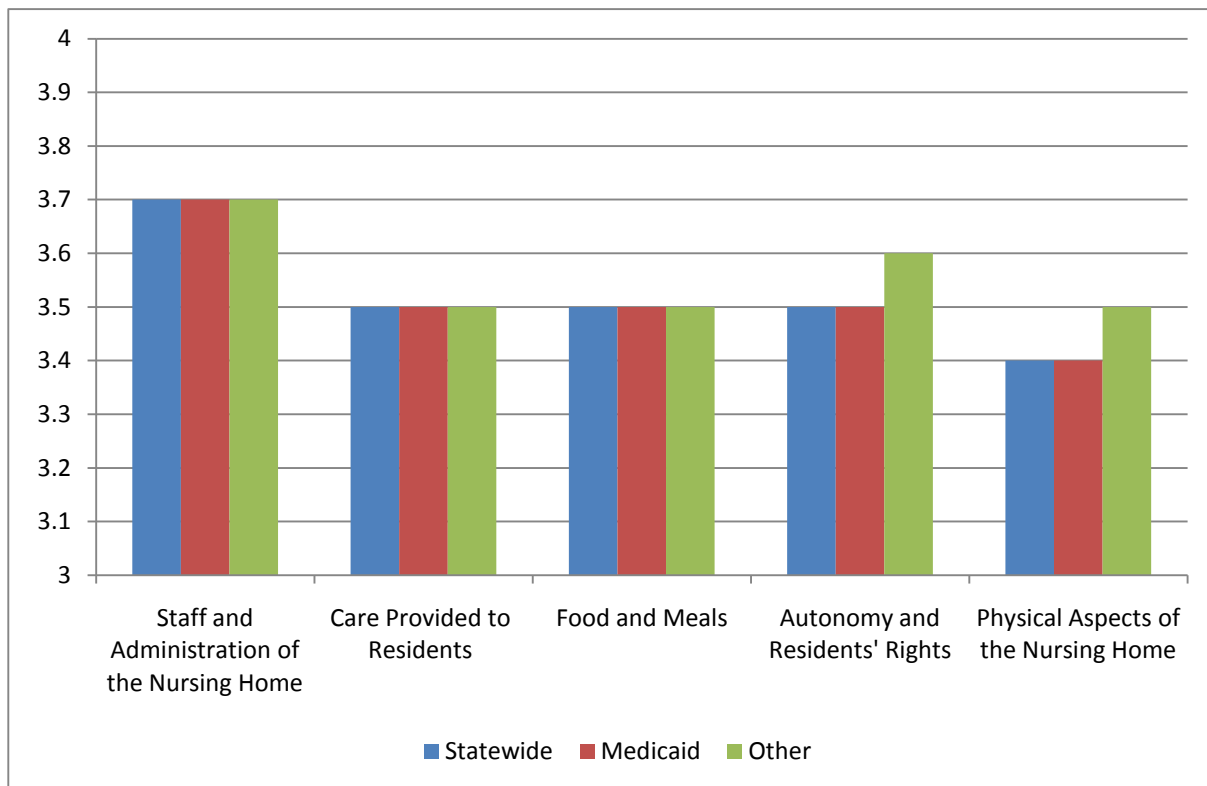


Responsible parties of residents living in nursing facilities owned by non-profit organizations rated each of the domains higher than nursing facilities owned by for-profit organizations. With the exception of Staff and Administration, responsible parties of residents living in nursing facilities owned by non-profit organizations also rated each of the domains higher than the statewide average (see Figure 4 and Table 4).

Table 4: Domain Ratings by Ownership Type—2010 Survey

Domain	Statewide	Ownership Type	
		Non-Profit	For-Profit
Staff and Administration	3.7	3.7	3.6
Care Provided	3.5	3.6	3.5
Food and Meals	3.5	3.6	3.4
Autonomy and Residents' Rights	3.5	3.7	3.4
Physical Aspects	3.4	3.6	3.4

Figure 5: Domain Ratings by Payment Type—2010 Survey



There was no difference in the rating of care among responsible parties of residents who pay with Medicaid versus other forms of payment across three of the five domains (“Staff and Administration,” “Care Provided to Residents,” and “Food and Meals”). However, responsible parties of residents living in nursing facilities paid with “other” sources rated “Autonomy and Residents Rights” and “Physical Aspects of the Nursing Home” higher than the responsible parties of residents living in nursing facilities paid with Medicaid (see Figure 5 and Table 5).

Table 5: Domain Ratings by Payment Type—2010 Survey

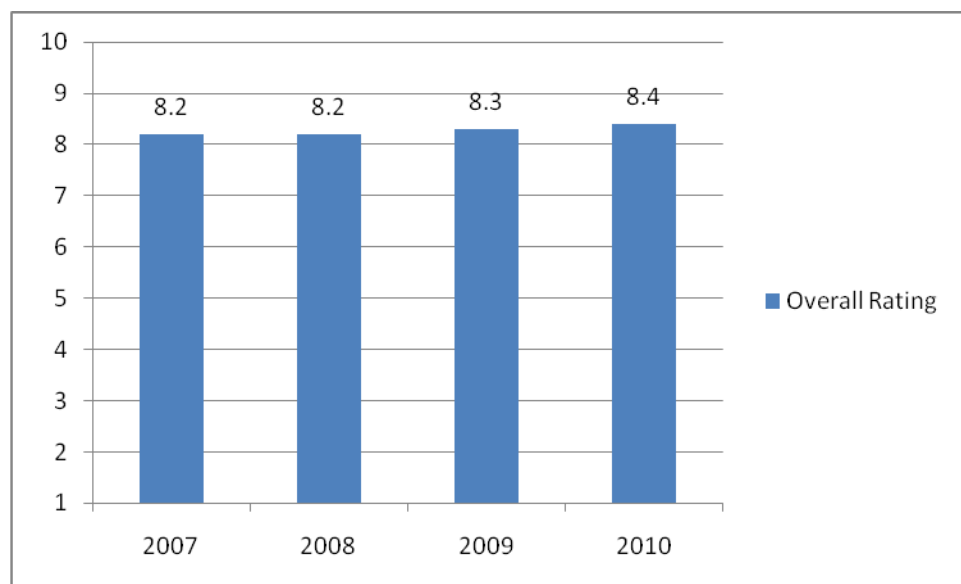
Domain	Statewide	Payment Type	
		Medicaid	Other
Staff and Administration	3.7	3.7	3.7
Care Provided	3.5	3.5	3.5
Food and Meals	3.5	3.5	3.5
Autonomy and Residents' Rights	3.5	3.5	3.6
Physical Aspects	3.4	3.4	3.5

VII. RESULTS—OVERALL EXPERIENCE RATINGS—2010 SURVEY

Two questions were included in the survey to assess a responsible party's overall experience and satisfaction with the nursing facility. The first item asked respondents to rate the care received at the nursing facility on a scale of 1 to 10 (with "1" being the worst possible care and "10" being the best possible care). Overall ratings were calculated by adding the rating given by each individual who responded to the question divided by the total number of responses.

The second overall experience and satisfaction item is the percentage of respondents answering "Definitely Yes" or "Probably Yes" to whether they would recommend the nursing facility. Figures 6 and 7, and Table 7 display the results for the two overall experience questions.

Figure 6: Overall Rating of Care Received at the Nursing Facility—2010 Survey



Generally speaking, the rating of care received has increased slightly over time and the percentage recommending nursing facilities has also increased slightly over time. The percentage recommending remained the same from 2009 to 2010 (see Figures 6 and 7, and Table 6).

Figure 7: Percentage that Responded “Definitely Yes” or “Probably Yes” to Recommending the Nursing Home to Someone

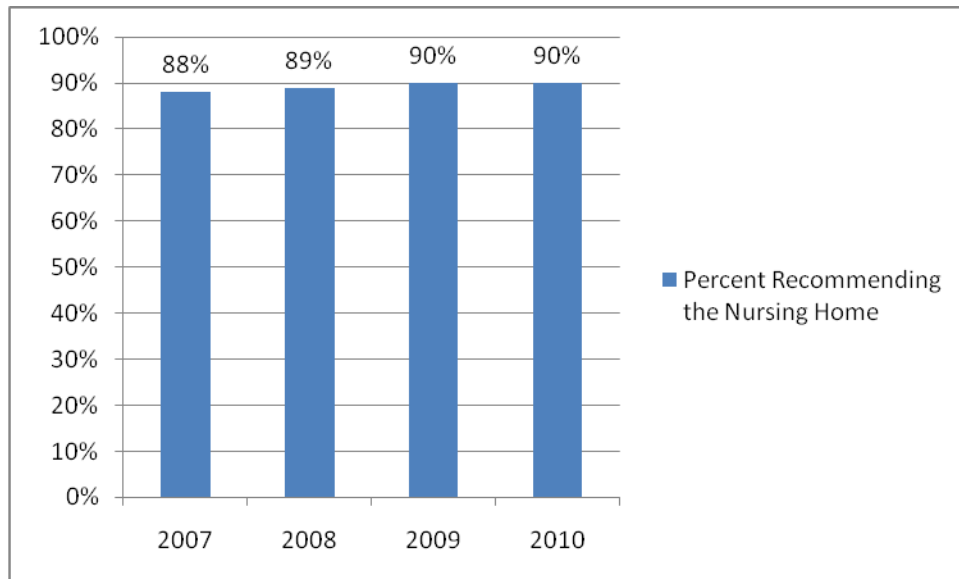


Table 6: Overall Ratings, 2007–2010

Item	2007 Rating	2008 Rating	2009 Rating	2010 Rating
Overall rating of care received at the nursing home	8.2	8.2	8.3	8.4
Percentage that said “Definitely Yes” or “Probably Yes” to “Would you recommend the nursing home?”	88%	89%	90%	90%

VIII. RESULTS—OVERALL EXPERIENCE RATINGS BY PEER GROUP—2010 SURVEY

Tables 7 through 9, and Figures 8 and 9 summarize the overall statewide rating and ratings of the peer groups. The statewide average rating for 2010 shows a very small increase and some peer group ratings show changes. These small differences in numbers may be *statistically significant (as represented by the arrows)*. From a practical standpoint however, the differences are small (only one-tenth of a point in many instances). This indicates that the ratings given by respondents have largely not changed over the 4 years the survey has been administered.

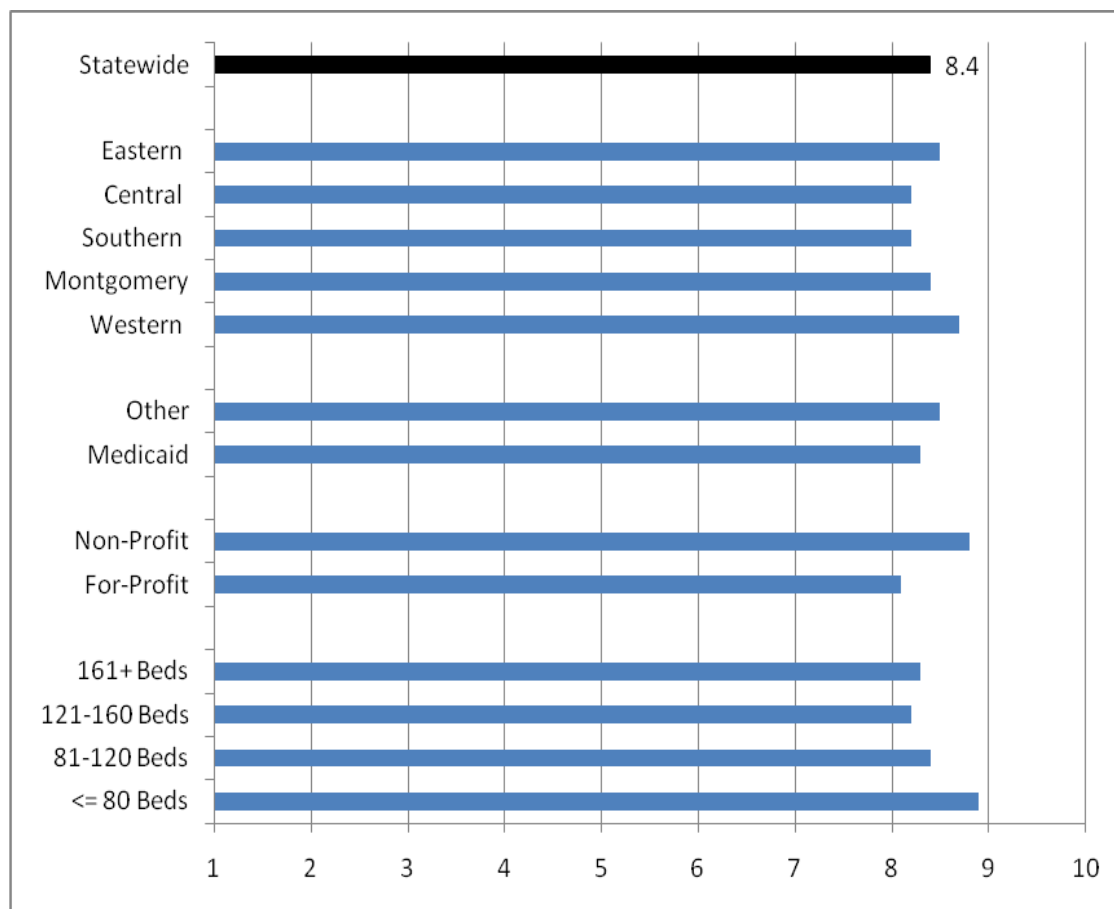
**Table 7: Overall Ratings of Care Received at the Nursing Facility
by Peer Group—2009 and 2010 Surveys**

	N 2010*	2009	2010
Statewide	9,066	8.3	8.4 (↑)
Region			
Western	1,767	8.7	8.7
Montgomery	1,398	8.4	8.4
Southern	1,302	8.2	8.2
Central	3,679	8.1	8.2 (↑)
Eastern	920	8.4	8.5 (↑)
Facility Size			
≤ 80 Beds	1,063	8.9	8.9
81–120 Beds	2,212	8.3	8.4 (↑)
121–160 Beds	2,666	8.1	8.2 (↑)
161+ Beds	3,125	8.3	8.3
Ownership Type			
Non-Profit	3,569	8.7	8.8 (↑)
For-Profit	5,497	8.1	8.2 (↑)
Payment Type			
Medicaid	5,552	8.3	8.3
Other	3,574	8.4	8.5 (↑)

* The symbol N represents the number of responses received in each group shown. The total number of respondents varies across each group, because not all respondents completed all questions.
2010 ratings with an up (↑) or down (↓) arrow are statistically different (at 95% confidence level) compared to the 2009 ratings.

As in the previous year, the smaller facilities (≤ 80 Beds) have the highest overall care rating within the size peer group, and also compared to the other peer groups in the state. Non-Profit facilities and facilities located in the Western region also rate overall care high. Generally speaking, larger facilities, for-profit facilities, and those facilities located in the Central and Southern regions of Maryland are rated lower compared to the statewide rating and other peer groups

Figure 8: Overall Ratings of Care Received at the Nursing Facility by Peer Group—2010 Survey



On a 10-point scale, with 1 being the worst care possible and 10 being the best care possible.

Compared with the statewide average, facilities located in the Eastern and Western regions, small facilities (≤ 80 Beds), facilities owned by non-profit organizations, and facilities with residents who use payment other than Medicaid are rated higher than their peer group counterparts.

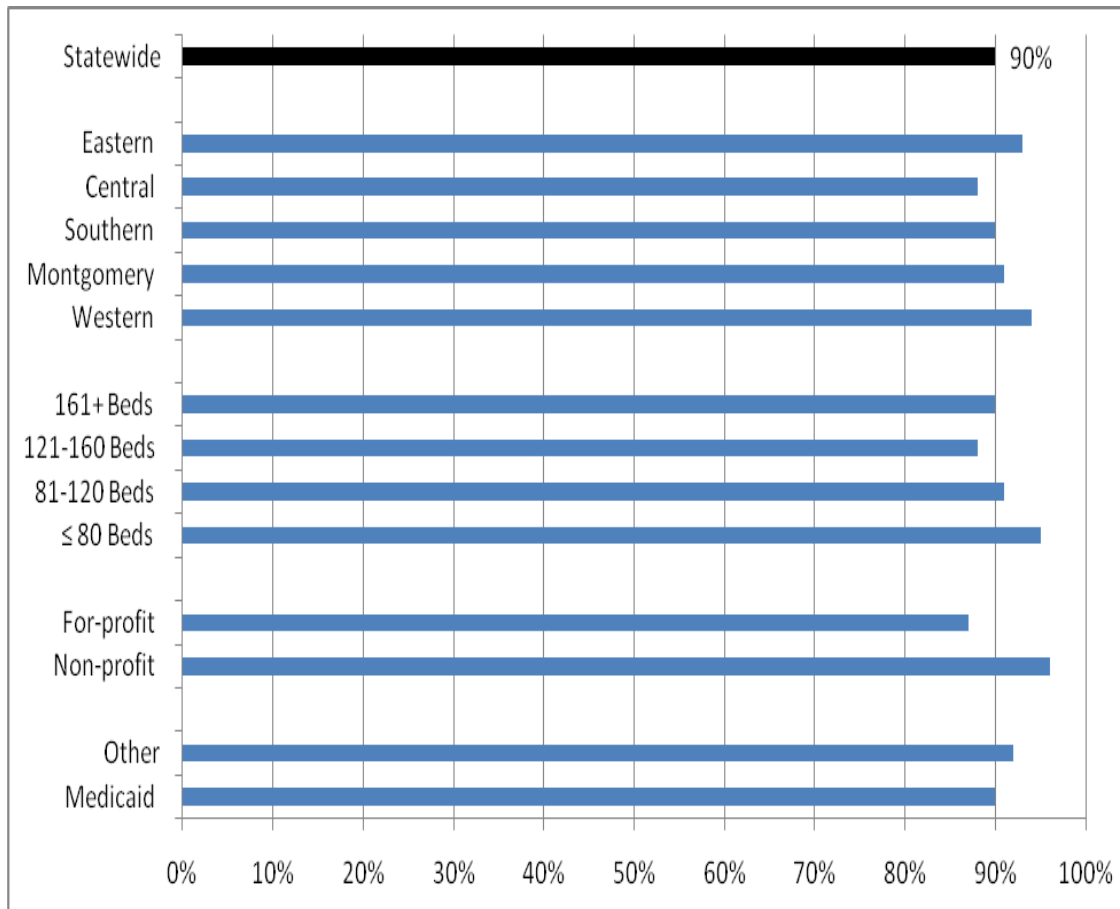
Table 8: Percentage of Responsible Parties That Answered “Definitely Yes” or “Probably Yes” to Recommending the Nursing Facility—2009 and 2010 Surveys

	N* 2010	2009	2010
Statewide	8,506	90%	90%
Region			
Western	1,615	93%	94% (↑)
Montgomery	1,359	92%	91%
Southern	1,181	89%	90%
Central	3,460	88%	88%
Eastern	878	92%	93% (↑)
Size			
≤ 80 Beds	1,018	95%	95%
81–120 Beds	2,004	89%	91% (↑)
121–160 Beds	2,501	89%	88% (↓)
161+ Beds	2,950	90%	90%
Ownership Type			
Non-Profit	3,334	95%	96% (↑)
For-Profit	5,139	87%	87%
Payment Source			
Medicaid	5,151	90%	90%
Other	3,355	90%	92% (↑)

* The symbol N represents the number of responses received in each group shown. The total number of respondents varies across each group, because not all respondents completed all questions. The 2010 ratings with an up (↑) or down (↓) arrow are statistically different (at 95% confidence level) compared to the 2009 ratings.

The statewide percentage of responsible parties recommending their facilities has not changed from 2009 to 2010. As in the previous year, responsible parties from smaller facilities and facilities owned by non-profit organizations recommended their facilities more than their peer group counterparts.

Figure 9: Percentage That Answered “Definitely Yes” or “Probably Yes” to Recommending the Nursing Facility—2010 Survey



IX. ITEM-LEVEL RATINGS

This section provides a summary of each of the survey items that are used in calculating the five domain ratings. There were two types of response choices: either a 4-point scale (where a 1 represented “Never” to 4 representing “Always”) or a choice of “Yes or No.”

In addition, there were two questions that rated overall experience and level of care provided by the nursing home. Item ratings were calculated by averaging responses for each question across all respondents, resulting in a rating with a range from 1 to 4. One of the overall measures used ratings ranging from 1 to 10. In the case of “Yes/No” questions, the percentage of those responding “Yes” or “No” is presented in the tables. Data from responsible parties, who indicated they did not know, were unsure, or that an item was not applicable were not included in these calculations.

Tables 9 through 13 on the following pages, list the survey items by the different domains of life and care. There is a table for each of the five domains. Within each table the questions used to calculate the domain ratings are listed, in addition to the screening questions. Screening questions refer to questions which ask respondents if they have encountered a specific experience in the nursing home. Screening questions are followed by other questions rating the experience. These questions are in italics in the tables below. Respondents that give a “No” answer to the screening question should skip the questions referring to the experience.

Low-scoring items indicate a low level of satisfaction and experience, while high ratings indicate a high level of satisfaction and experience.

Table 9: Item-Level Ratings for Staff and Administration by Peer Group—2010 Survey

Staff and Administration of the Nursing Home	For-Profit	Non-Profit	≤ 80 Beds	81–120 Beds	121–160 Beds	161+ Beds	Western Maryland	Montgomery	Southern Maryland	Central Maryland	Eastern Shore	Statewide
In the last 6 months...												
Q7. If you asked for information about the resident, how often did you get the information within 48 hours?	3.5	3.6	3.7	3.6	3.5	3.5	3.7	3.5	3.5	3.5	3.6	3.6
Q8. How often did the nurses and nursing assistants treat you with courtesy and respect?	3.7	3.8	3.8	3.7	3.7	3.7	3.8	3.7	3.7	3.7	3.8	3.7
Q9. How often did the nurses or nursing assistants treat the resident with courtesy and respect?	3.6	3.6	3.7	3.6	3.6	3.6	3.7	3.5	3.6	3.6	3.6	3.6
Q10. Did the nurses or nursing assistants ever discourage you from asking questions about the residents? (% responding "No")	95%	97%	97%	96%	96%	96%	97%	95%	97%	96%	96%	96%

Low-scoring items indicate a low level of satisfaction and experience, while high ratings indicate a high level of satisfaction and experience.

Table 10: Item-Level Ratings for Care Provided to Residents by Peer Group—2010 Survey

Care Provided to Residents	For-Profit	Non-Profit	≤ 80 Beds	81–120 Beds	121–160 Beds	161+ Beds	Western Maryland	Montgomery	Southern Maryland	Central Maryland	Eastern Shore	Statewide
In the last 6 months...												
Q11. Were you invited to participate in a care conference (% responding "Yes")	92%	95%	96%	93%	94%	93%	96%	94%	94%	91%	96%	93%
Q13. During any of your visits, did you help the residents with toileting? (Number responding "Yes")*	1,072	759	204	445	530	652	323	308	266	761	177	1,831
Q14. How often, if at all, did you help with toileting because the nurses or nursing assistants either were not available or made him or her wait too long?	3.3	3.4	3.4	3.4	3.3	3.3	3.4	3.3	3.3	3.3	3.4	3.3
Q15. Did the resident look and smell clean?	3.3	3.5	3.6	3.4	3.4	3.4	3.5	3.4	3.4	3.4	3.4	3.4
Q16. Did the resident use the nursing home's laundry service for his or her clothes? (Number responding "Yes")*	3,631	2,459	792	1,586	1,748	1,964	1,378	942	833	2,314	623	6,090
Q17. How often were you satisfied with the laundry service the resident received?	3.2	3.4	3.5	3.3	3.2	3.2	3.4	3.2	3.2	3.1	3.3	3.2
Q18. Did you see any resident, including this resident, behave in a way that made it hard for nurses or nursing assistants to provide care? (Number Responding "Yes")*	1,387	3,946	294	616	695	856	512	405	353	950	241	2,461
Q19. How often did nurses/nursing aides handle the situation in a way that was acceptable to you?	3.4	3.5	3.6	3.4	3.3	3.4	3.6	3.4	3.3	3.4	3.5	3.4

Care Provided to Residents	For-Profit	Non-Profit	≤ 80 Beds	81–120 Beds	121–160 Beds	161+ Beds	Western Maryland	Montgomery	Southern Maryland	Central Maryland	Eastern Shore	Statewide
In the last 6 months...												
<i>Q20. Did you have issues or concerns with the care the resident received in the nursing home? (Number responding "Yes")*</i>	1,914	1,093	293	721	910	1,083	475	496	469	1,274	293	3,007
Q22. Were you satisfied with the way the nursing home staff handled issues that you brought to their attention?	3.0	3.2	3.2	3.1	3.1	3.1	3.2	3.1	3.0	3.0	3.2	3.1
Q23. Did you ever stop yourself from talking to any nursing home staff about your concerns because you thought they might take it out on the resident? (% responding "No")	90%	92%	94%	91%	89%	90%	93%	90%	89%	90%	92%	90%

*Questions in italics are the screener questions. These questions are not factored into the average rating.

Low-scoring items indicate a low level of satisfaction and experience, while high ratings indicate a high level of satisfaction and experience.

Table 11: Item-Level Ratings for Food and Meals by Peer Group—2010 Survey

Food and Meals	For-Profit	Non-Profit	≤ 80 Beds	81–120 Beds	121–160 Beds	161+ Beds	Western Maryland	Montgomery	Southern Maryland	Central Maryland	Eastern Shore	Statewide
Q24. How often did you help with eating or drinking because the nurses or nursing assistants were not available to help or made him or her wait too long?	3.4	3.6	3.6	3.6	3.5	3.4	3.5	3.6	3.5	3.4	3.5	3.5

Low-scoring items indicate a low level of satisfaction and experience, while high ratings indicate a high level of satisfaction and experience.

Table 12: Item-Level Ratings for Autonomy and Residents Rights by Peer Group—2010 Survey

Autonomy and Residents Rights	For-Profit	Non-Profit	≤ 80 Beds	81–120 Beds	121–160 Beds	161+ Beds	Western Maryland	Montgomery	Southern Maryland	Central Maryland	Eastern Shore	Statewide
Q25. If the resident desires private space for visits such as with clergy or family, is private space provided?	3.4	3.7	3.6	3.5	3.4	3.5	3.6	3.6	3.4	3.4	3.5	3.5
Q26. In the last 6 months, did you observe that the resident or the resident's privacy was protected while he/she was dressing, showering, or bathing, or in a public area?	3.5	3.7	3.7	3.6	3.5	3.6	3.6	3.6	3.6	3.5	3.6	3.6

Low-scoring items indicate a low level of satisfaction and experience, while high ratings indicate a high level of satisfaction and experience.

Table 13: Item-Level Ratings for Physical Aspects of the Nursing Home by Peer Group—2010 Survey

Physical Aspects of the Nursing Home	For-Profit	Non-Profit	≤ 80 Beds	81–120 Beds	121–160 Beds	161+ Beds	Western Maryland	Montgomery	Southern Maryland	Central Maryland	Eastern Shore	Statewide
In the last 6 months...												
Q27. Did the public areas of the nursing home look and smell clean?	3.4	3.6	3.7	3.5	3.4	3.5	3.6	3.5	3.4	3.4	3.5	3.5
Q28. When you visited, how often did the resident's room look and smell clean?	3.3	3.5	3.6	3.4	3.3	3.4	3.5	3.5	3.4	3.3	3.4	3.4
Q29. When you visited, was the noise level around the resident's room acceptable to you?	3.4	3.5	3.5	3.4	3.4	3.4	3.4	3.4	3.4	3.4	3.4	3.4

Low-scoring items indicate a low level of satisfaction and experience, while high ratings indicate a high level of satisfaction and experience.

GLOSSARY OF TERMS

Average: The average rating in this report refers to weighted average. The number of respondents who answered a question was adjusted statistically to ensure that all groups of responsible parties are represented in these results.

Domains: The 2010 Maryland Nursing Facility Family Survey contained 25 items designed to measure a responsible party's overall experience and satisfaction with the nursing facility as well as specific areas of life and care in the nursing home. These areas or domains are:

1. Staff and Administration of the Nursing Home
2. Care Provided to Residents
3. Food and Meals
4. Autonomy and Residents' Rights
5. Physical Aspects of the Nursing Home.

Peer Groups

For the purpose of making comparisons, facilities were divided into four peer groups: 1) facilities in the same geographic region; 2) facilities of similar licensed bed size; 3) payment source; and 4) for-profit/non-profit facilities. Results for all peer groups are presented in the charts and tables.

Region of the State: Region is determined by the county where the facility is located. The regions are:

- *Western Maryland:* Allegany, Carroll, Frederick, Garrett, and Washington Counties
- *Montgomery:* Montgomery County
- *Southern Maryland:* Calvert, Charles, Prince George's, and St. Mary's Counties
- *Central Maryland:* Baltimore City; Anne Arundel, Baltimore, Harford, and Howard Counties
- *Eastern Shore:* Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, and Worcester Counties.

Size: Nursing home size categories were calculated from licensed bed size counts. There are four size categories:

1. 80 or fewer beds (≤ 80 Beds)
2. 81–120 beds

3. 121–160 beds
4. More than 160 beds (>160 Beds).

Ownership Type: Facilities were categorized as for-profit or non-profit ownership types. Non-profit facilities include government- (State, County, or City) owned, Veterans Administration, and church related facilities.

Payment Source/Type: Source of payment for residents has been classified into Medicaid and Other.

Statistically Significant Differences: The tables in this report show an up (↑) or down (↓) arrow if statistically significant differences exist (at 95% confidence level) between the 2009 and 2010 ratings.